

Charter # Only

P970000001660

VALIDATION ONLY

800002043668--1
-01/02/97--01059--021
****122.50 ****122.50

Requestor's Name

Jimenez and Associates, P.A.

Address

A PROFESSIONAL ACCOUNTING CORPORATION
454 N.W. 22nd AVE., SUITE 209
MIAMI, FLORIDA 33125

City

State

ZIP

Phone #

541-4714

CORPORATION(S) NAME

VITA-SALUD, INC

☐ PROFIT

☐ NON-PROFIT

☐ AMENDMENT

☐ MERGER

☐ FOREIGN

☐ DISSOLUTION

☐ MARK

☐ LIMITED PARTNERSHIP

☐ ANNUAL REPORT

☐ RESERVATION

☐ REINSTATEMENT

☐ OTHER

☐ CERTIFIED COPY

☐ PHOTO COPIES

☐ CERTIFICATE UNDER SEAL

☐ WALK IN

☐ WILL WAIT

☐ PICK UP

☐ MAIL OUT

☐ CALL

☐ AFTER 4:30

Name	Availability
Document Examiner	
Updater	<i>PRM</i>
Updater Verifier	<i>1/8/97</i>
Acknowledgment	
W.P. Verifier	

CR2E031 (R4-84)

FILED
97 JAN -2 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
VITA-SALUD, INC.

FILED
97 JAN -2 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We the undersigned incorporate for the purpose of becoming a corporation under the laws of the State of Florida, providing for the formation, rights, privileges, immunities - and liabilities of incorporation for profit and subject to the following provisions.

ARTICLE I

The name of the corporation shall be:
VITA-SALUD, INC.

ARTICLE II

This corporation shall have perpetual existence.

ARTICLE III

This corporation is organized with the purpose to engage - in the transaction of distribution of nutritional and ---- beauty products, as well as import-export of the same items and all other lawfull activities of business permitted under the laws of the State of Florida and of the United --- States of America.

ARTICLE IV

The agregate maximum number of shares which this corpora-- tion shall have authority to issue and have outstanding at anyone time is: Five Hundred Shares at One Dollar Value.

ARTICLE V

This corporation shall begin business with no less than -- Five Hundred Dollars (\$500.00).

ARTICLE VI

The post office address of the principal office of this -- corporation shall be: 706 N.W. 87 Avenue, No. 210, Miami, Florida 33172.

ARTICLE VII

The name and address of the initial Registered Office of --
this corporation in the State of Florida is:

Gloria Sherburne
706 N.W. 87 Ave No. 210
Miami, Florida 33172

ARTICLE VIII

The business of the corporation shall be managed by a Board
of Directors. The number of Directors, no less than one, no
more than five and shall be fixed by resolution of the ----
stockholders at regular or special meetings, subject to the
manner of holding such meetings prescribed by the by-laws.

ARTICLE IX

The name and post office address of the members of the Board
of Directors who shall serve as members thereof, are as ----
follows:

NAME	OFFICE	ADDRESS
Gloria Galvez	President	8800 S.W. 123 Ct # J110 Miami, Florida 33186
Gloria Sherburne	Secretary	706 N.W. 87 Ave. # 210 Miami, Florida 33172

ARTICLE X

Distribution to incorporators is as follows:

Gloria Galvez	250 Shares	\$ 250.00 Value
Gloria Sherburne	250 Shares	\$ 250.00 Value

ARTICLE XI

Each stockholder before offering to sell or otherwise dispose
of the stock of this corporation, owned by him first offer --
such stock to the remaining stockholders of this corporation
and obtaining their refusal to purchase same, proceed to sell
at the fair market value thereof.

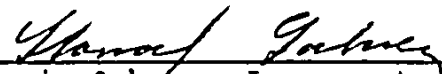
ARTICLE XII

Amendments to the Articles of Incorporation, merger, consolidations or dissolution shall be approved and submitted to the stockholders for approval 100% of all votes will be necessary and thirty days notice shall be provided.

ARTICLE XIII

This corporation shall have full power to carry on and transact each or all business enumerated in Article III of this -- Articles of Incorporation. Shall have all the general and --- additional powers now conferred upon it by the laws and the -- by-laws.

IN WITNESS THEREOF, we the undersigned, have made subscribed and acknowledged these Articles of Incorporation, on this -- 14th Day of December 1996.


Gloria Galvez - Incorporator

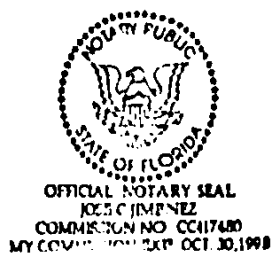
STATE OF FLORIDA)
)
COUNTY OF DADE)



Gloria Sherburne - Incorporator

Before me the undersigned authority duly authorized to administer oath and take acknowledgement, personally appeared --- GLORIA GALVEZ AND GLORIA SHERBURNE -----

who after first being duly sworn, executed the foregoing --- ARTICLES OF INCORPORATION, freely and voluntarily for the --- purpose therein expressed.

IN WITNESS THEREOF I have hereunto set my hand and official - seal at Miami, said County and State, this 14th Day of December, 1996.




NOTARY PUBLIC, State of Florida at
large.

FILED

97 JAN -2 AM 9:31

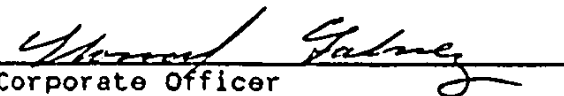
CERTIFICATE OF DESIGNATION
REGISTERED AGENT=REGISTERED OFFICE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.325, Florida --
Statutes, the undersigned corporation, organized under the
laws of the State of Florida, submits the following -----
statement in designating the registered office/registered
agent in the State of Florida.

The name of the Corporation is VITA-SALUD, INC.


The name and address of the Registered Agent and office is
Gloria Sherburne, 706 N.W. 87 Avenue # 210, Miami, Florida
33172.


Corporate Officer

Title: Secretary

Dated: December 14, 1996.

Having been named to accept service of process for the above
stated corporation, at the place designated in this certifi-
cate, I hereby agree to act in this capacity, and further --
agree, to comply with the provisions of all statutes relative
to the proper and complete performance of my duties; and ---
accept the duties and obligations of section 607.325,, Flori-
da Statutes.


Gloria Sherburne, Registered Agent
accepting office.